2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000170746

Entity Name: OCEAN CHIROPRACTIC AND HEALTH CENTER, INC.

FILED Mar 13, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

526 SE DIXIE HWY 805 VIRGINIA AVENUE STUART, FL 34994 STE 10

FT PIERCE, FL 34982

Current Mailing Address: New Mailing Address:

526 SE DIXIE HWY 805 VIRGINIA AVENUE STUART, FL 34994 STE 10

FT PIERCE, FL 34982

FEI Number: 02-0735207 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEINER, MELISSA S
73 S.W. FLAGLER AVE.
STUART, FL 34994 US
DEINER, MELISSA S
526 SE DIXIE HWY
STUART, FL 34994 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 03/13/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 DEINER, JOHN B
 Name:
 DEINER, JOHN B

 Address:
 73 S.W. FLAGLER AVE.
 Address:
 805 VIRGINIA AVNUE #10

Address: 73 S.W. FLAGLER AVE. Address: 805 VIRGINIA ANNOE #10
City-St-Zip: STUART, FL 34994 City-St-Zip: FT PIERCE, FL 34982

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 DEINER, MELISSA S

 DEINER, MELISSA S

Address: 73 S.W. FLAGLER AVE. Address: 526 SE DIXIE HWY
City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34994

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN B. DEINER P 03/13/2006